CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR CO	NAMAITTEE		
July 10, 2014		Fehrin			
2.b. IF COMMITTEE, NAME OF CANDIDATE	11117	TORRIN	7	La 51 5051011 5 1 5 5	
Friends of Rita Feb	01410			3. ELECTION DATE August 7	2014
	IKING			myus	1001.
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	City		State	Zip Code	Dhana
424 STONE Ridge 1		XSDIV		774/3 (473)	Phone タフロー/8 4 タ
4.b. CANDIDATE'S HOME ADDRESS (if differen	t than 4 a.)	.,	, , ,	1370 (720)	070 7070
Street or Rural Route	City		State	Zip Code	Phone
				•	1 1.2
5. OFFICE SOUGHT (include district number, if	applicable)	6. NAME OF	POLITICAL '	TREASURER (may be o	andidate)
DemocRATIC STATE EXEC. Commit	DIST 11		Fehr		and actory
7. CATEGORY OR REPORT (Check one)	0.000		/ Ciry	704	
QUARTER QUARTER QUARTER	FOURTH QUARTER	PRE- PRIMARY	PRE- GENERAL	MID-YEAR SUPPLEMENTAL	YEAR-END SUPPLEMENTAL
8.a. BEGINNING DATE OF REPORTING PERIOD		8.b. ENDING	DATE OF REPO	RTING PERIOD	SOFFICIAL
APRIL 1,2014		June	30,3	2014	
9. (Check one)					
a. This campaign is exempt from detaile	d disclosure herau	es contributions (i-aludina in ki		
tures total \$1,000 or less for this repo	erting period. (Com	plete items 12d.,	12e. and 12f.)	nd) received total \$1,000	or less AND expendi-
,					
 This campaign is required to file a de and/or expenditures total more than \$ 	tailed financial disci 31.000 for this repor	losure because c rting period.	ontributions (ir	ncluding in-kind) receive	d total more than \$1,000
			372		
10. I/we do solemnly swear or affirm that the ir	oformation containe	ed in this campaid	in financial die	releases report is true or	
accurate accounting of campaign contribution	ons and expenditure	es required to be	reported by th	e candidate committee l	by the Campaign
Financial Disclosure Act. Additionally, I/we benefit of the candidate or for any other nor	swear or affirm that	t no campaign co	ntributions hav	ve been expended for th	e personal financial
Concinc of the candidate of for any other nor	ipolitical purpose as	s delined by the i	ederai interna	revenue code.	
Pote Telain	7/10/19	1 (Sit,	Dohnan	7/10/14
signature of candidate	date /		signature of	Jewwy of political treasurer	- deth
V	ASS - congress		g	penasar reasons.	Jale
11. WITNESS SIGNATURE					
				*	
signature of witness	date	-	signa	ture of witness	date
12. SUMMARY					
2 BALANCE ON HANDLAST REPORT				0	
a. BALANCE ON HAND LAST REPORT					
b. TOTAL RECEIPTS THIS PERIOD				.1,650.00	
c. TOTAL DISBURSEMENTS THIS PERIOD		***************************************	•••••••••••••••••••••••••••••••••••••••	00.33	
c. TOTAL DISBURSEMENTS THIS PERIOD				\$	
	- 200				1,551 + 67
d. BALANCE ON HAND (12.a. plus 12.b. r	ninus 12.c.)			\$	(1)))
	^7 74				Δ.
e. TOTAL LOANS OUTSTANDING	30:51 M9 0	1-706-4107		\$	
Xt.	Alcan H.	· 00 1195		-	-
f. TOTAL OBLIGATIONS OUTSTANDING	122 MMOJI	40110773		\$	
	ALTHUM NO	1711			

SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	14. REPORT COVERING THE PERIOD
Rita Fehring	FROMY-1-14 TO: 6-30-14
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	
a. Unitemized Contributions (\$100 or less from each source this period)	\$ 150.00
b. Itemized Contributions (over \$100 from each source this period)	\$ 1,500.00
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)	\$ 1,650.°°
16. LOANS RECEIVED THIS REPORTING PERIOD	_
17. INTEREST RECEIVED THIS REPORTING PERIOD	\$O
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)	\$ 1, 6 50.0°
DISBURSEMENTS	
19. EXPENDITURES (other than loan payments)	
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e	g., printing, postage, gasoline)
\$ <u>98.3</u>	3_
\$	
\$	
\$	
\$	
\$	
\$	
Total of Expenditures (\$100 or less each payee)	\$ 98.33
b. Itemized Expenditures (Over \$100 each payee this period)	
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)	
20. LOAN REPAYMENTS MADE THIS PERIOD	
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)	\$ 98,33
22.IN-KIND CONTRIBUTIONS	
a. Unitemized in-kind contributions (\$100 or less from each source this period)	\$ 0
b. Itemized in-kind contributions (over \$100 from each source this period)	\$
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b)s <u></u>
23. OBLIGATIONS	
a. Unitemized Obligations Outstanding (\$100 or less each)	\$
b. Itemized Obligations Outstanding (Over \$100 each)	\$
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	12.f.)\$

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE RITA FERRING		2. REPORT COVER	
MIN PERKING		FROM: 4-1-14	TO: 6-30-14
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUT			0
		ontributions totaling more than \$100 from any contributor	r)
Pauli NA	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name WAM PIER		Primary Election	500.00
1808 Hidden HARbOR	Rd	Runoff (Local Elections Only)	
City HIXSOM	State Zip Code 37343	Date of Contribution	Aggregate This Election
Occupation RETIRED TEAC	sher	5-22-14	500.00
Employer N/A			
First Name Li S A	Middle Name	Contribution Received For:	Amount of Contribution
Last Name/Organization Name Selvidge		Primary Election D2 General Election	100,00
Address 921 Diamondhead	DR	Runoff (Local Elections Only)	
City Oolte WAH	State Zip Code 37363	Date of Contribution	Aggregate This Election
Occupation Home MAKER		5-22-14	100.00
Employer N /A			1.1
First Name	Middle Name	Contribution Received For:	Amount of Contribution
			The state of the s
Last Name/Organization Name 13 R 00 K S		☐ Primary Election ☐☐ General Election	500,00
Last Name/Organization Name BROOKS Address G101 AMOS Road		Primary Election Primary Election Runoff (Local Elections Only)	500,00
Last Name/Organization Name BROOKS Address GIOI AMOS Road City Ootte WAH	State ZipCode TN 373 63		500,00
Last Name/Organization Name 13 ROOKS Address GIOI AMOS Road City Ootte WAH Occupation RETIRED CLARY	TN 37363	Runoff (Local Elections Only)	
Last Name/Organization Name 13 ROOKS Address G101 AMOS Road City Ootte WAH Occupation	TN 37363	Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
Last Name/Organization Name 13 ROOKS Address 9101 AMOS Road City Oofte WAH Occupation RETIRED CI4: RY Employer N/A First Name	TN 37363	Runoff (Local Elections Only) Date of Contribution	Aggregate This Election
Last Name/Organization Name 13 ROOKS Address 9101 AMOS Road City Ootte WAH Occupation RETIRED CIA:RY Employer N/A	TN 37363 FARMER	□ Runoff (Local Elections Only) Date of Contribution C - C - 1 - 1	Aggregate This Election
Last Name/Organization Name 13 ROOKS Address 9101 AMOS Road City of the WAH Occupation RETIRED CIA: RY Employer N/A First Name CHARLES Last Name/Organization Name STEIN Name	TN 37363 FARMER Middle Name	□ Runoff (Local Elections Only) Date of Contribution C - C - 1 - 1 Contribution Received For:	Aggregate This Election 500.66
Last Name/Organization Name 13 ROOKS Address 9101 AMOS Road City Ootte WAH Occupation RETIRED CIA:RY Employer N/A First Name CHARIES Last Name/Organization Name STEIN N: CE Address 8821 WINTER GERRO	TN 37363 FARMER Middle Name	□ Runoff (Local Elections Only) Date of Contribution C - C - C Contribution Received For: □ Primary Election	Aggregate This Election 500.66 Amount of Contribution 160.00 Aggregate This Election
Last Name/Organization Name 13 ROOKS Address 9101 AMOS Road City of the WAH Occupation RETIRED CIA: RY Employer N/A First Name CHARLES Last Name/Organization Name STEIN Name	TN 37363 FARMER Middle Name	□ Runoff (Local Elections Only) Date of Contribution C - C - L Contribution Received For: □ Primary Election □ Runoff (Local Elections Only)	Aggregate This Election 500.66 Amount of Contribution
Last Name/Organization Name 13 ROOKS Address GIOI AMOS Road City Ootte WAH Occupation RETIRED CIA:RY Employer N/A First Name CHARIES Last Name/Organization Name STRIN Nice Address 8821 WINTER GRRG City ChATTANOGA Occupation	TN 37363 FARMER Middle Name	□ Runoff (Local Elections Only) Date of Contribution C - C - L Contribution Received For: □ Primary Election □ Runoff (Local Elections Only) Date of Contribution	Aggregate This Election 500.66 Amount of Contribution 160.00 Aggregate This Election

ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COM	MITTEE			2. REPORT COVE	RING THE PERIOD		
Rita Fehrin	ug			FROM4-1-14	TO: 6-30-14		
3 TOTAL TEMZED GAMPAIGN CO	INTRIBUTIONS FRO	MPRECEDING PA	GE letter \$ if first itemized	i page)	Amount 1,200 . 00		
CONFLETE THE APPROPRIATE (TE	The second secon						
Richard	Middle Name		Compliant Received Fo		Amount of Contribution		
BONNINGTON			☐ Primary Election	General Election	106,00		
5873 LAKE Reso	RT TERR.	Apt. C212	☐ Ford# Local Elect	tons Only	discountry typerates		
ChATTANOOGA	ラル	37415	Date of Contribution		Aggregate This Election		
Cocupation BASIN 255 MAN	. F. Santa		6-21	-14	100,00		
Employer Self Employed	na iz navije se						
First Name BREADA Last Name Organization Name	Middle Nag		Contribution Received I	For:	Amount of Contribution		
Last Name Operator Name NUNN	1		Primary Election	General Election	100.00		
Address 456 BROOKMED	ide Circle		Runoff (Local Elec	ctions Only)			
CityHiXSON		Zip Code 373 43	Date of Contribution		Aggregate This Election		
Occupation ClAims Admi		***************************************	6-21	6-21-14			
Employer UUMN	0,0,7,7,7		-		100,00		
First Name LARRY	Middle Nam	e	Contribution Received	For.	Amount of Contribution		
Last Name/Organization Name HATT LEV			Primary Election	General Election	100,00		
Address 1316 GREENBRO	ok Lane		Runoff (Local Elec	/			
HIXSON .	State 7N	ZipCode 373 43	Date of Contribution		Aggregate This Election		
Occupation Retired		17	6-21	100.00			
Employer N/A					-		
First Name	Middle Nam	ne	Contribution Received F	or.	Amount of Contribution		
Last Name/Organization Name	L		Primary Election	General Election	v		
Address			Runoff (Local Elec	ctions Only)			
City	State	Zip Code	Date of Contribution		Aggregate This Election		
Cocupation							
Employer							
5. TOTAL ITEMIZED CONTRIBUTI	IONS						
(Carry forward to item 3. of next page if ad (If this is the last page of contributions, this	ditional pages of this form a	re used.)	e		1,500 000		
, and page of consumers. Sub		non rou or summery.)			page 4 018		

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR CO	MMITTEE				2. REPORT COVER	RING THE PERIOD			
RYIT TE	NKING				FRUM: 4-1-14	TO: 6-30-14			
3. TOTAL ITEMIZED IN-KIND CO						Amount			
4. COMPLETE THE APPROPRIATE I	TEMS FOR EACH I	ITEMIZE	D IN-KIND CONTRIBU	TION (in-kind contributions totaling i	more than \$100 from any con	tributor during the period)			
First Name	The state of the s				In-Kind Contribution Received For: Primary Election General Election				
Last Name/Organization Name	2			Runoff (Local Elections Only)					
Address				Date of In-Kind Contribution		Aggregate this Election			
City	State Zip Code			Description of In-Kind Contribution		3			
Occupation	pation Employer								
First Name	Mid	ddle Name		In-Kind Contribution Received		Value of In-Kind Contribution			
Last Name/Organization Name					General Election				
Address				Runoff (Local Election Date of In-Kind Contribution	is Only)	I			
City	I co	1	7.6.4		Managed	Aggregate this Election			
Occupation	Sta	10:	Zip Code	Description of In-Kind Contribution					
- contain	upation Employer								
First Name Middle Name				In-Kind Contribution Receiver	d For:	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Election					
Address	Address				•	Aggregate this Election			
City	Star	ne l	Zip Code	Description of in-Kind Contribution	The Control of the Co				
Occupation	Employer								
irst Name Middle Name									
H H M S T S T S T S T S T S T S T S T S T S	Mid	tdie Name		In-Kind Contribution Received Primary Election	d For: 3 General Election	Value of In-Kind Contribution			
Last Name/Organization Name				Runoff (Local Election					
Address				Date of In-Kind Contribution	ATTACAMA A DO	Aggregate this Election			
City	Star	nte	Zip Code	Description of In-Kind Contribution					
Cocupation	Employer	annon managarah.							
First Name	Midd	dle Name		In-Kind Contribution Receive		Value of In-Kind Contribution			
Last Name/Organization Name	Last Name/Organization Name				General Election S Only)				
Address	Address					Aggregate this Election			
City	State	e	Zip Code	Description of In-Kind Contribution	***************************************				
Occupation	Employer			treet in the					
5. TOTAL ITEMIZED IN-KIND CO	NTRIBUTIONS								
(Carry forward to item 3, of next page if a (if this is the last page of in-kind contribut	dditional pages of this	form are st be show	used.) n in item 22b. of summarv)			0			
SS-1128 (Rev. 2/06)					5 of 8				

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE	RING THE PERIOD				
Rita Fehr	TO: 6-30-14				
3. TOTAL ITEMIZED CAMPAIGN EXPENDITU	Amount				
4. COMPLETE THE APPROPRIATE ITEMS FOR E		iod)			
First Name	Middle Nan		Purpose of Expenditure	,,,,	Amount of Expenditure
Last Name/Business Name	<u> </u>				
OFFIC DEPOT	(572	ce 2156)	copies of	Flyers	05.35
Offic Depot Address 5756 Highway 153		2	1	,	98,33
City // : × 5	State	Zip Code	1		
CityHIXSON	TM	^{Zip Code} 37343			
First Name	Middle Nan	ne	Purpose of Expenditure	4	Amount of Expenditure
Last Name/Business Name					
Address					
Ct.	T	Г]		
City	State	Zip Code			
Ci-st No.					
First Name	Middle Nam	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address		1			
City	State	Zip Code	†		
First Name	е	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address	Address				
City	State	Zip Code			
			Te.		
First Name	Middle Name	Э	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Name		Durance of Evene diture		A
i listivanie	3	Purpose of Expenditure		Amount of Expenditure	
Last Name/Business Name					
Address					
City	State	Zip Code	company U.B.	- E 1	
5. TOTAL ITEMIZED EXPENDITURES					
(Carry forward to item 3. of next page if additional pages					98.33
(If this is the last page of expenditures, this amount must	be shown in i	tem 19b. of summary.)			150

ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDATE OR COMMITTEE							2. REPORT COVERING THE PER					
Rita Fehring								FROM: TO: 6-30-		,-30-14		
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)												
Complete the Following for the Source	of the Loan											
	First Name Middle Name (Outstanding Loan Balance Loans (Beginning of Period) Received							g Loan Balance of Period)	
Last Name/Organization Name												
				oan Received For: Date of Loan								
City	State	Zip Code			ry Election General Election [(Local Elections Only)							
L	ist All Endo	sers or Guara	intors fo	r Above Loa	n (If more spa	ce is neede	ed please at	tach a	page)			
First Name		Middle Name			First Name	- ,	De NOVA	-		Middle	Name	
Last Name/Organization Name					Last Name/Or	ganization Na	me			1		
Address					Address							
City		State	Zip Co	ode	City					State		Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding							
First Name Middle Name				First Name Middle Name								
Last Name/Organization Name				Last Name/Org	ganization Na	me						
Address				Address								
City	City State Zip Co			ode	City					State		Zip Code
Amount Guaranteed Outstanding				Amount Guara	nteed Outstar	nding						
First Name		Middle Name			First Name					Middle	e Name	
Last Name/Organization Name					Last Name/Organization Name							
Address					Address							
City		State	Zip Co	ode	City State Zip				Zip Code			
Amount Guaranteed Outstanding					Amount Guara	nteed Outstan	nding					
First Name		Middle Name	0		First Name Middle Name							
Last Name/Organization Name					Last Name/Organization Name							
Address				Address								
City		State	Zip Co	de	City State Zip Code				Zip Code			
Amount Guaranteed Outstanding		•			Amount Guara	nteed Outstan	ding					
4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.)							anding Loan Balance End of Period)					
(Total outstanding loan balance should also be shown in item 12.e. on front page.)					0							



ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

			FROM: 4-1-	14/ TO: 0	
COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED OBLIGATION (obligations totaling more than \$100 owed to any			Debt Incurred	Payments This Period	Outstanding Balance (End of Period)
period)	cu to any	(Degining of Feriod)	This Fellod	This renod	(End of Period)
Middle Na	me				
Last Name/Business Name					
Address					
State	Zip Code				
Middle Na	me)(5.7		
		-			
State	Zip Code	1			
Middle Na	ne				
Last Name/Business Name					
Address					
State	Zip Code	1			
				150	
Middle Na	ne				
		-			
N. H.		_			
State	Zip Code				
Middle Na	ne				
Last Name/Business Name					
Address					
State	Zip Code	1			
-		VINIAND IN LI	KIT		
column mus	t also be shown	0	0	0	0
	an \$100 ow period) Middle Na State Middle Nar State Middle Nar State Middle Nar State Middle Nar	an \$100 owed to any period) Middle Name State Zip Code Middle Name State Zip Code Middle Name State Zip Code Middle Name	In \$100 owed to any period) Middle Name State Zip Code Middle Name State Zip Code Middle Name State Zip Code Middle Name State Zip Code	In \$100 owed to any period) Middle Name State Zip Code	m \$100 owed to any (Beginning of Period) Middle Name State Zip Code